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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 2461

|   |   |   |   |                                      |                                |
|---|---|---|---|--------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/218,913  | <b>FILING OR 371(c) DATE</b><br>12/22/1998<br><b>RULE</b>   | <b>CLASS</b><br>424                       | <b>GROUP ART UNIT</b><br>1652   | <b>ATTORNEY DOCKET NO.</b><br>98.736 |                                |
| <b>APPLICANTS</b><br>RODERICK L. HALL, SURREY, UNITED KINGDOM;<br>CHRISTOPHER T. POLL, SLOUGH, UNITED KINGDOM;<br>BENJAMIN B. NEWTON, BERKSHIRE, UNITED KINGDOM;<br>WILLIAM J.A. TAYLOR, WINDSOR, UNITED KINGDOM;   |   |   |   |                                      |                                |
| <b>** CONTINUING DATA *****</b>   |   |   |   |                                      |                                |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |   |   |                                      |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 01/27/1999</b>  |   |   |   |                                      |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <u>                    </u><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>UNITED KINGDOM | <b>SHEETS DRAWING</b><br>41   | <b>TOTAL CLAIMS</b><br>45            | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>28213   |   |   |   |                                      |                                |
| <b>TITLE</b><br>METHOD FOR ACCELERATING THE RATE OF MUCOCILIARY CLEARANCE   |   |   |   |                                      |                                |
| <b>FILING FEE RECEIVED</b><br>1600  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |                                |